

<b>CLAIMS ONLY</b>	SERIAL NO. <div style="border: 1px solid black; padding: 2px; display: inline-block;">09995270</div>	FILING DATE <div style="border: 1px solid black; height: 20px; width: 100%;"></div>
APPLICANT(S) <div style="border: 1px solid black; height: 20px; width: 100%;"></div>		

CLAIMS						
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1.	/					
2		/				
3		/				
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TOTAL IND.	1					
TOTAL DEP.	20					
TOTAL CLAIMS	21					

  

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	IND.	DEP.	IND.	DEP.	IND.	DEP.
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100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS